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#### INCOMPLETE ENCOUNTER MANAGEMENT

#### INCOMPLETE ENCOUNTER REPORTS

#### ALPHA LIST OF INCOMPLETE ENCOUNTERS

The Alpha List of Incomplete Encounters option prints a list of all errors found in the TRANSMITTED OUTPATIENT ENCOUNTER ERROR file (#409.75) at the time the report is generated.

#### INCOMPLETE ENCOUNTER ERROR REPORT

The Incomplete Encounter Error Report is used to print all inconsistencies and missing data for a selected date range for encounter records which 1) have not been transmitted or 2) have been rejected by the Austin NPCD.

#### INCOMPLETE ENCOUNTERS BY ERROR CODE

The Incomplete Encounters by Error Code option is used to print the errors in the TRANSMITTED OUTPATIENT ENCOUNTER ERROR CODE file (#409.76).

#### **SUMMARY REPORT - IEMM**

This report prints a summary showing total encounters for a date range and the number and percentage of incomplete encounters.

#### CORRECT INCOMPLETE ENCOUNTERS

This option is used to view and correct incomplete encounters.

#### RETRANSMIT AMBULATORY CARE DATA BY DATE RANGE

This option is used to mark outpatient encounters within a user-specified date range for retransmission to the NPCDB in Austin.

#### SELECTIVE RETRANSMISSION OF NPCDB REJECTIONS

This option provides a list of patients who currently have rejections from NPCDB and the ability to selectively choose which encounters should be marked for retransmission.

#### **ACRP REPORTS**

#### CLINIC GROUP MAINTENANCE FOR REPORTS

This option allows for entering, editing, and printing clinic groups and clinic group assignments which are used for reports.

#### CLINIC UTILIZATION STATISTICAL SUMMARY

This option is used to print clinic utilization statistics for a specified date range.

#### **ENCOUNTER ACTIVITY REPORT**

This option produces a report of encounter, visit, and unique patient statistics by selected clinic, provider, or stop code.

#### ENCOUNTER 'ACTION REQUIRED' REPORT

This option is used to print a report of "action required" encounters in detailed or statistics format for a specified date range.

#### **OUTPATIENT ENCOUNTER WORKLOAD STATISTICS**

This option prints outpatient encounter workload statistics based on "parent" encounters in the OUTPATIENT ENCOUTNER file.

#### PATIENT ACTIVITY BY APPOINTMENT FREQUENCY

This option is used for printing patient appointment activity for a selected date range by selected stop codes, a range of stop codes, or by clinic group.

#### PATIENT ENCOUNTER LIST

This option is used to print a listing of patient encounters in re verse chronological order for a specified patient.

#### REVIEW OF SCHEDULING/PCE/PROBLEM LIST DATA

This option is used to print a report of Scheduling, Patient Care Encounter, Visit Tracking, and Problem List data for a selected patient and encounter dat e.

#### TREND OF FACILITY UNIQUES BY 12 MONTH DATE RANGES

This option is used for trending facility outpatient uniques by overlapping 12 month date ranges for the past 5 years.

Section 1 - Ambulatory Care Reporting Menu

#### **Error Listing**

#### Introduction

This option generates the Transmitted Outpatient Encounter Error List which contains a listing of the errors reported by the National Patient Care Database (NPCDB) for a user-specified date range. The error code description describes why the encounter data could not be filed in the NPCDB.

If you select the default of first at the "Start with date..." prompt, the report will automatically print to the last date.

Information provided may include patient name, encounter date, hospital location, error code, error code description, and date/time of transmission to NPCDB.

#### **Example**

```
NPCDB Data Error Report.

This report requires 132 columns.

START WITH DATE/TIME OF X-MIT TO NPCDB: FIRST// <RET>
DEVICE: A700 RIGHT MARGIN: 80// 132

DO YOU WANT YOUR OUTPUT QUEUED? NO// <RET> (NO)
```

TRANSMITTER OFFICATION FUNCTIONS FOR THE

TO NPCDB PATIENT ENCOUNTER DATE LOCATION  ERROR CODE ERROR CODE DESCRIPTION  JUN 21,1996 08:27: SMITH,PAUL MAY 08, 1996 09:00 ENDOCRINOLOGY A00 Invalid Stop Code.  JUN 21,1996 08:27: JONES,MATTHEW MAY 09, 1996 14:00 GENERAL MEDICINE 500 Invalid Diagnosis Code.  JUN 21,1996 08:27: BURKE,KYLE MAY 06, 1996 08:00 ORTHO 620 Needs one Procedure Practitioner code or is invalid.  JUN 21,1996 08:27: SCOTT,MICHAEL MAY 08, 1996 09:00 ORTHO 605 Invalid Procedure Code.  JUN 21,1996 08:28: O'KEEFE,DAN JUN 19, 1996 09:00 GENERAL MEDICINE 805 Number of Dependents is not '00'-'99' or 'XX'.  AUG 14, 1996 10:07 MORGAN,JENNIFER AUG 08, 1996 10:00 GENERAL MEDICINE 902 Outpatient Classification Type inconsistent with Veteran.	DATE/TIME O		ENCOUNTER ERROR L	IST U	JN 21,1996 17:20 PAGE 1 HOSPITAL
JUN 21,1996 08:27: SMITH,PAUL MAY 08, 1996 09:00 ENDOCRINOLOGY A00 Invalid Stop Code.  JUN 21,1996 08:27: JONES,MATTHEW MAY 09, 1996 14:00 GENERAL MEDICINE 500 Invalid Diagnosis Code.  JUN 21,1996 08:27: BURKE,KYLE MAY 06, 1996 08:00 ORTHO 620 Needs one Procedure Practitioner code or is invalid.  JUN 21,1996 08:27: SCOTT,MICHAEL MAY 08, 1996 09:00 ORTHO 605 Invalid Procedure Code.  JUN 21,1996 08:28: O'KEEFE,DAN JUN 19, 1996 09:00 GENERAL MEDICINE 805 Number of Dependents is not '00'-'99' or 'XX'.  AUG 14, 1996 10:07 MORGAN,JENNIFER AUG 08, 1996 10:00 GENERAL MEDICINE			PATIENT	ENCOUNTER DATE	
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A00 Invalid Stop Code.  JUN 21,1996 08:27: JONES,MATTHEW MAY 09, 1996 14:00 GENERAL MEDICINE  500 Invalid Diagnosis Code.  JUN 21,1996 08:27: BURKE,KYLE MAY 06, 1996 08:00 ORTHO  620 Needs one Procedure Practitioner code or is invalid.  JUN 21,1996 08:27: SCOTT,MICHAEL MAY 08, 1996 09:00 ORTHO  605 Invalid Procedure Code.  JUN 21,1996 08:28: O'KEEFE,DAN JUN 19, 1996 09:00 GENERAL MEDICINE  805 Number of Dependents is not '00'-'99' or 'XX'.  AUG 14, 1996 10:07 MORGAN,JENNIFER AUG 08, 1996 10:00 GENERAL MEDICINE					
JUN 21,1996       08:27:       JONES,MATTHEW       MAY 09, 1996 14:00       GENERAL MEDICINE         500       Invalid Diagnosis Code.       JUN 21,1996 08:27:       BURKE,KYLE       MAY 06, 1996 08:00       ORTHO         620       Needs one Procedure Practitioner code or is invalid.         JUN 21,1996 08:27:       SCOTT,MICHAEL MAY 08, 1996 09:00       ORTHO         605       Invalid Procedure Code.         JUN 21,1996 08:28:       O'KEEFE,DAN JUN 19, 1996 09:00       GENERAL MEDICINE         805       Number of Dependents is not '00'-'99' or 'XX'.         AUG 14, 1996 10:07       MORGAN,JENNIFER AUG 08, 1996 10:00       GENERAL MEDICINE	JUN 21,1996	08:27:	SMITH, PAUL	MAY 08, 1996 09:00	ENDOCRINOLOGY
500 Invalid Diagnosis Code.  JUN 21,1996 08:27: BURKE,KYLE MAY 06, 1996 08:00 ORTHO  620 Needs one Procedure Practitioner code or is invalid.  JUN 21,1996 08:27: SCOTT,MICHAEL MAY 08, 1996 09:00 ORTHO  605 Invalid Procedure Code.  JUN 21,1996 08:28: O'KEEFE,DAN JUN 19, 1996 09:00 GENERAL MEDICINE  805 Number of Dependents is not '00'-'99' or 'XX'.  AUG 14, 1996 10:07 MORGAN,JENNIFER AUG 08, 1996 10:00 GENERAL MEDICINE	A00	Invalid Sto	op Code.		
JUN 21,1996       08:27:       BURKE,KYLE       MAY 06, 1996 08:00       ORTHO         620       Needs one Procedure Practitioner code or is invalid.         JUN 21,1996       08:27:       SCOTT,MICHAEL MAY 08, 1996 09:00       ORTHO         605       Invalid Procedure Code.         JUN 21,1996       08:28:       O'KEEFE,DAN JUN 19, 1996 09:00       GENERAL MEDICINE         805       Number of Dependents is not '00'-'99' or 'XX'.         AUG 14, 1996       10:07       MORGAN,JENNIFER AUG 08, 1996 10:00       GENERAL MEDICINE	JUN 21,1996	08:27:	JONES, MATTHEW	MAY 09, 1996 14:00	GENERAL MEDICINE
620 Needs one Procedure Practitioner code or is invalid.  JUN 21,1996 08:27: SCOTT,MICHAEL MAY 08, 1996 09:00 ORTHO  605 Invalid Procedure Code.  JUN 21,1996 08:28: O'KEEFE,DAN JUN 19, 1996 09:00 GENERAL MEDICINE  805 Number of Dependents is not '00'-'99' or 'XX'.  AUG 14, 1996 10:07 MORGAN,JENNIFER AUG 08, 1996 10:00 GENERAL MEDICINE	500	Invalid Dia	agnosis Code.		
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605 Invalid Procedure Code.  JUN 21,1996 08:28: O'KEEFE,DAN JUN 19, 1996 09:00 GENERAL MEDICINE  805 Number of Dependents is not '00'-'99' or 'XX'.  AUG 14, 1996 10:07 MORGAN,JENNIFER AUG 08, 1996 10:00 GENERAL MEDICINE	620	Needs one	Procedure Practiti	oner code or is inv	alid.
JUN 21,1996 08:28:       O'KEEFE, DAN       JUN 19, 1996 09:00       GENERAL MEDICINE         805       Number of Dependents is not '00'-'99' or 'XX'.         AUG 14, 1996 10:07       MORGAN, JENNIFER AUG 08, 1996 10:00       GENERAL MEDICINE	JUN 21,1996	08:27:	SCOTT, MICHAEL	MAY 08, 1996 09:00	ORTHO
805 Number of Dependents is not '00'-'99' or 'XX'. AUG 14, 1996 10:07 MORGAN, JENNIFER AUG 08, 1996 10:00 GENERAL MEDICINE					
AUG 14, 1996 10:07 MORGAN, JENNIFER AUG 08, 1996 10:00 GENERAL MEDICINE	JUN 21,1996	08:28:	O'KEEFE,DAN	JUN 19, 1996 09:00	GENERAL MEDICINE
· · · · · · · · · · · · · · · · · · ·	805	Number of 1	Dependents is not	'00'-'99' or 'XX'.	
902 Outpatient Classification Type inconsistent with Veteran.	AUG 14, 199		•	•	
	902	Outpatient	Classification Ty	pe inconsistent with	n Veteran.

TITN 21 1006 17:20 DACE 1

## ACRP Reports Menu Clinic Group Maintenance for Reports

#### Introduction

This option allows for entering, editing, and printing clinic groups and clinic group assignments which are used by various reports in the ACRP Reports Menu.

Clinic group functionality provides a more facility-flexible manner of grouping clinics than the traditional division, service, name, and clinic stop code categories. Assigning clinics to clinic groups allows users to organize data by group or limit output to a specific group.

Clinic groups for reports can be thought of as somewhat synonymous with primary care teams but are broader in function. They can be used to group clinics by service provided, physical location, etc. An example of this would be the definition of a "MHC" clinic group that would allow the Mental Health Center staff to obtain a report of 'action required' encounters for Mental Health Clinics only.

The following actions are available.

Edit Clinic Groups Allows editing of existing clinic group or

addition of new clinic group

Print Clinic Groups Provides a list of clinic groups, in alphabetical

order, at date/time printed

Edit Clinic Group Assignments Allows editing of clinic group assignments

either for a selected clinic or a range of clinics

Print Clinic Group Assignments Provides a list of clinic group assignments

either alphabetically by clinic name or by clinic group. Those clinics not assigned to a clinic

group are also included.

This option is locked with the SD SUPERVISOR security key.

# **ACRP Reports Menu Clinic Group Maintenance for Reports**

#### **Example**

```
Select one of the following:
                   EDIT CLINIC GROUPS
         PG
                  PRINT CLINIC GROUPS
         EΑ
                  EDIT CLINIC GROUP ASSIGNMENTS
                  PRINT CLINIC GROUP ASSIGNMENTS
Select clinic group maintenance action: EA EDIT CLINIC GROUP ASSIGNMENTS
    Select one of the following:
                 SELECTED CLINIC LOOP THROUGH CLINICS
Edit by: LOOP THROUGH CLINICS
Select clinic to begin with: DERMATOLOGY
Clinic: DERMATOLOGY
CLINIC GROUP (REPORTS): BLUE TEAM//
Clinic: ENDOCRINOLOGY
CLINIC GROUP (REPORTS): BLUE TEAM// <RET>
Clinic: ENT
CLINIC GROUP (REPORTS): BLUE TEAM// RED TEAM
Clinic: GI
CLINIC GROUP (REPORTS): BLUE TEAM// ^
End of loop.
    Select one of the following:
                  EDIT CLINIC GROUPS
         PG
                  PRINT CLINIC GROUPS
                   EDIT CLINIC GROUP ASSIGNMENTS
                   PRINT CLINIC GROUP ASSIGNMENTS
```

Select clinic group maintenance action: <RET>

## ACRP Reports Menu Clinic Utilization Statistical Summary

#### Introduction

This option is used to print clinic utilization statistics for a specified date range for one/many/all divisions. Statistics may be printed for all clinics, selected clinics, a range of clinics, a range of stop codes, or by a single clinic group.

It is intended to provide an indication of utilization by considering a clinic's unused (or perhaps, overused) scheduling capacity. It includes a percentage of scheduling utilization (scheduled slots vs. total slots), and a percentage of actual utilization (scheduled slots less no-shows vs. total slots).

The accuracy of utilization as reflected by this report is dependent on the accuracy of the clinic profiles for the clinics being examined. That is, if a clinic profile has many more slots defined than the provider could possibly see, it will appear as though the clinic has poor utilization even though the provider may be very busy.

Data elements produced on the report will include the number of scheduled appointments, no shows, overbooks, open slots, adjusted availability, clinic capacity, scheduling utilization percentage, and actual utilization percentage for each selected clinic/stop code/clinic group. A note is provided at the bottom of each page explaining how some of the data elements on the report are derived.

When any of the clinic selection criteria is used, the output may be divided into two sections, the Clinic Summary and the Provider Summary. The Provider Summary is based on the default providers defined for those clinics which appear in the Clinic Summary. This may not necessarily be the provider that actually provided treatment to the patient.

A provider may have several clinics which appear in the Clinic Summary. In the Provider Summary, the statistics from a provider's multiple clinics are combined into a single line item. Clinics that do not have a default provider defined are not reflected in the Provider Summary.

## ACRP Reports Menu Clinic Utilization Statistical Summary

#### **Example**

Division prompts will only appear at multi-divisional facilities.

```
For Medical Center division: ALL// ALBANY
                                           500
Select another division: <RET>
*** DATE RANGE SELECTION ***
Beginning date: 9 1 97 (SEP 01, 1997)
  Ending date: 12 1 97 (DEC 01, 1997)
    Select one of the following:
                  ALL CLINICS
         SC
                  SELECTED CLINICS
         RC
                  RANGE OF CLINICS
                RANGE OF STOP CODES
         RS
         CG CLINIC GROUP
Enter response: SC SELECTED CLINICS
Select HOSPITAL LOCATION NAME: AUDIOLOGY
Select HOSPITAL LOCATION NAME: CT SCAN
Select HOSPITAL LOCATION NAME: <RET>
This report requires 132 column output.
DEVICE: HOME// A100 RIGHT MARGIN: 132// <RET>
DO YOU WANT YOUR OUTPUT QUEUED? NO// Y (YES)
Requested Start Time: NOW// <RET> (JAN 13,1998@09:22)
```

## ACRP Reports Menu Clinic Utilization Statistical Summary

# **Example**

				FOR SELE	N STATISTICA CTED CLINICS DIVISION: A		*>	
	For date range: SEP 1,1997 to DEC 1,1997 Date printed: JAN 13,1998@10:30 Page: 1					Page: 1		
	SCHEDULED APPTS.	NO SHOWS	OVER BOOKS		ADJUSTED AVAIL.	CLINIC CAPACITY	PERCENT SCHEDULING UTILIZATION	PERCENT ACTUAL UTILIZATION
* CLINIC SUMMARY	<i>[</i> *							
AUDIOLOGY	30	0	0	1392	1392	1422	2.11%	2.11%
CT SCAN	2	0	0	470	470	472	0.42%%	0.42%
* CLINIC TOTALS	* 32	0	0	1862	1862	1894	1.69%	1.69%

NOTE: Scheduled appointment totals include no-shows and overbooks. Adjusted availability equals open slots minus overbooks. Clinic capacity equals scheduled appointments minus overbooks plus open slots. Percent scheduling utilization equals scheduled appointments (times 100) divided by clinic capacity. Percent actual utilization equals scheduled appointments minus overbooks (times 100) divided by clinic capacity. The flag, "(No ava. found)" may indicate the clinic is not currently in use; but does not mean it is unavailable for scheduling.

\_\_\_\_\_

#### Introduction

This option provides a report of encounter, visit, and unique patient statistics within a specified date range by one of three selected perspectives: clinic, provider, or stop code. It can be produced in summary or detailed format.

In the summary format, counts of encounters, visits, and uniques are displayed for each of the items in the selected perspective, as well as a report total for the three workload elements. The output can be produced alphabetically or by frequency of encounters, visits, or uniques.

Detail format allows selection of specific clinics, providers, or stop codes. For each of the items selected, it will produce frequency ranked lists of diagnoses and procedures recorded, in addition to counts of encounters, visits, and uniques.

Two examples of the output are provided in the Example section of this option documentation - summary format and detail format.

### **Example**

Division prompts will only appear at multi-divisional facilities.

```
For Medical Center Division: ALL// ALBANY 500

Select another division: <RET>

*** DATE RANGE SELECTION ***

Beginning date: FIRST// 9 1 97 (SEP 01, 1997)

Ending date: LAST// 12 1 97 (DEC 01, 1997)

Select one of the following:

C CLINIC
P PROVIDER
S STOP CODE

Select category for report output: PROVIDER
```

#### **Example**

```
Choose as many of the following statuses as you wish to include in the report:
```

CHECKED IN
CHECKED OUT
NO ACTION TAKEN
INPATIENT APPOINTMENT
NON-COUNT
ACTION REQUIRED

Select encounter status: CHECKED OUT// <RET>

Select encounter status: <RET>

Select one of the following:

D DETAILED S SUMMARY

Select report format: SUMMARY

Select one of the following:

A ALPHABETIC

E ENCOUNTER TOTALS
V VISIT TOTALS
U UNIQUE TOTALS

Select report order: ALPHABETIC

You have selected the following report parameters:

Medical Center Division: ALBANY

Activity date range: SEP 1,1997 to DEC 1,1997 Report category: PROVIDER perspective

Output format: SUMMARY Collation order: ALPHABETIC Encounter status: CHECKED OUT

OK? YES// <RET>

DEVICE: HOME// A100 RIGHT MARGIN: 132// <RET>
DO YOU WANT YOUR OUTPUT QUEUED? NO// Y (YES)

Requested Start Time: NOW// <RET> (JAN 14,1998@07:22)

## **Example** (Summary output format)


<\*> ENCOUNTER ACTIVITY REPORT <\*>

Medical Center Division: ALBANY

Activity date range: SEP 1,1997 to DEC 1,1997 Report category: PROVIDER perspective

Output format: SUMMARY Collation order: ALPHABETIC Encounter status: CHECKED OUT

Date printed: JAN 14,1998@08:10 Page: 1

Provider	Encounters	Visits	Uniques
ADAMS, CYNTHIA	1	1	1
DEFIS, ELIZABETH	2	2	1
KAPPEL, DENNIS	2	2	2
KILMIRE, MIKE	6	5	2
KOPEL, STEPHEN C	62	34	18
STEINER, ALAN	2	2	2
WHELTER, ROBERT	3	1	1
WILSON, PHYLLIS L	15	11	6
	=======	=======	======
REPORT TOTAL:	87	50	25

## **Example** (Detail output format for provider Stephen Kopel)

<*>	ENCOUNTER ACTIVITY REPORT	<*>

Medical Center Division: ALBANY Activity date range: SEP 1,1997 to DEC 1,1997 Report category: PROVIDER perspective Output format: DETAIL

Encounter status: CHECKED OUT

Date printed: JAN 14,1998@08:15

Provider	Encounters	Visits	Uniques
KOPEL,STEPHEN C	62	34	18
Diagnosis	Primary	Secondary	Total
911.0 ABRASION TRUNK	52	3	55
311. DEPRESSIVE DISORDER NEC	2	2	4
312.01 UNSOCIAL AGGRESSION-MILD	3	0	3
342.01 FLAC HEMIPLEG & HEMIPAR, DOM.	1	1	2
221.8 BEN NEO FEM GENITAL NEC	0	1	1
250.01 DIABETES MELLI W/O COMP TYP I	1	0	1
320.3 STAPHYLOCOCC MENINGITIS	0	1	1
330.8 CEREB DEGEN IN CHILD NEC	0	1	1
440.8 ATHEROSCLEROSIS NEC	0	1	1
741.01 SPIN BIF W HYDRCEPH-CERV	1	0	1
912.1 ABRASION SHLDR/ARM-INFEC	0	1	1
440.22 ATHERO, NAT ART OF EXTR W/PAIN	1	0	1
=======================================	=======	========	========
TOTAL:	61	11	72

Procedures	Total
99213 OFFICE/OUTPATIENT VISIT, EST	12
99201 OFFICE/OUTPATIENT VISIT, NEW	11
20000 INCISION OF ABSCESS	7
99218 OBSERVATION CARE	4
20005 INCISION OF DEEP ABSCESS	3
33015 INCISION OF HEART SAC	3
30000 DRAINAGE OF NOSE LESION	2
11200 REMOVAL OF SKIN TAGS	1
43243 UPPER GI ENDOSCOPY & INJECT.	1
44020 EXPLORATION OF SMALL BOWEL	1
90701 DTP IMMUNIZATION	1
=======================================	=======
TOTAL:	46

#### Introduction

This option is used to print a report of 'action required' encounters in detailed or statistics only format for a specified date range. It is intended as a replacement for the 'action required' output from the Appointment Management report.

You may print the data for all clinics, selected clinics, a range of clinics, all clinic groups, or an individual clinic group. The report requires 132 column output.

The detailed format allows the following print order selection within clinics: alphabetic, date/time, or terminal digit. The user can select continuous output (without pagination by clinic) or output that produces a separate page for every clinic. This format includes both detailed lists and a statistical summary.

The detailed lists are organized by clinic and include patient name, SSN, date/time of encounter and type (scheduled appointment, add/edit, disposition, etc.). It also reflects the check-in and check-out user (if defined) and attempts to list all of the data elements that are required for transmission to the National Patient Care Database (NPCDB).

The statistics only format (and the statistics portion of the detailed format) provides counts of deficiencies by reason and by clinic location. Counts by deficiency reason are likely to be greater than counts by location since a single encounter may have more than one deficiency reason. These statistics will be organized and subtotaled by clinic group if output by clinic group is selected.

#### **Example**

Division prompts will only appear at multi-divisional facilities.

```
For Medical Center Division: ALL// ALBANY
                                           500
Select another division: <RET>
    Select one of the following:
           DETAILED REPORT
         S
                  STATISTICS ONLY
Select report type: DETAILED REPORT// STATISTICS ONLY
**** Date Range Selection ****
Beginning date: 9 1 97 (SEP 01, 1997)
  Ending date: 12 1 97 (DEC 01, 1997)
    Select one of the following:
                 ALL CLINICS
         AC
         SC
                  SELECTED CLINICS
         RC
                 RANGE OF CLINICS
                  ALL CLINIC GROUPS
         AG
                  SELECTED CLINIC GROUP
         SG
Select report format: AG ALL CLINIC GROUPS
This report requires 132 column output.
DEVICE: HOME// A100
                       RIGHT MARGIN: 132// <RET>
DO YOU WANT YOUR OUTPUT QUEUED? NO// Y (YES)
Requested Start Time: NOW// <RET> (JAN 15,1998@07:22)
```

<pre>&lt;*&gt; ENCOUNTER 'ACTION REQUIRED' STATISTICS &lt;*&gt;</pre>	
For date range: SEP 1,1997 to DEC 1,1997 Date printed: JAN 15,1998@07:40	Page: 1
Clinic group: AQUA TEAM	
Reason: City is missing or invalid. Diagnosis code (ICD-9) is missing or invalid Diagnosis Priority is invalid or more than one is ma CPT procedure code is missing or invalid. Provider/Practitioner Type code is missing or invali Encounter Eligibility code missing or invalid Eligibility Code Inactive Invalid means test indicator Missing or invalid Period of Service Period of Service is inactive.  Clinic: GENERAL MEDICINE  Total for clinic group AQUA TEAM: 10	9 9 10 8 8 1 1 1 1
Clinic group: BLUE TEAM  Reason: Diagnosis code (ICD-9) is missing or invalid Diagnosis Priority is invalid or more than one is ma CPT procedure code is missing or invalid. Provider/Practitioner Type code is missing or invali Agent Orange classification required Service Connected classification required  Clinic: CARDIOLOGY	3 3 3 3 1 1
Total for clinic group BLUE TEAM: 3	

# Example

<pre>&lt;*&gt; ENCOUNTER 'ACTION REQUIRED' STATISTICS &lt;*&gt;</pre>	
or date range: SEP 1,1997 to DEC 1,1997 ate printed: JAN 15,1998@07:40	Page:
Clinic group: RED TEAM	
Reason: Address line 1 is invalid. City is missing or invalid. State code is missing or invalid. Zip code is missing or invalid. County code is invalid. Diagnosis code (ICD-9) is missing or invalid Diagnosis Priority is invalid or more than one is ma CPT procedure code is missing or invalid. Provider/Practitioner Type code is missing or invali Encounter Eligibility code missing or invalid Eligibility Code Inactive Invalid means test indicator Missing or invalid Period of Service Period of Service is inactive. Service Connected classification required Clinic:	1 1 1 1 1 1 2 2 1 1 2 1 1
DERMATOLOGY UROLOGY	1 2
Total for clinic group RED TEAM: 3	

FACILITY 'ACTION REQUIRED' ENCOUNTERS IDENTIFIED: 16

#### Introduction

This option provides a comprehensive accounting of outpatient encounter workload broken out by type and status for a specified date range. It provides statistics of encounters, visits, and uniques for a facility and by division (if multidivisional). Users may optionally obtain a breakout of statistics by clinic group; detailed lists of encounters, visits, or uniques for a division; or a list of 'action required'/not accepted unique patients.

This report is based on counts of "parent" encounters in the OUTPATIENT ENCOUNTER file. The entry of encounter data normally results in the creation of multiple records in the OUTPATIENT ENCOUNTER file, representing the primary stop code, the credit stop code (if any), and the addition of procedure codes. A checked-out encounter will normally consist of 2-3 records in the OUTPATIENT ENCOUNTER file.

A patient encounter will consist of a single "parent" encounter (the primary stop code record). As such, a count of "parent" encounters is an accurate reflection of patient encounter workload. Conceptually, an "encounter" consists of all of the related data stored in the OUTPATIENT ENCOUNTER, VISIT and PCE "V" files.

In the FileMan sense, the term "parent" used here refers to records where the PARENT ENCOUNTER field is null. "Child" encounters are outpatient encounter records that contain a pointer in this field to another outpatient encounter record.

Facility workload, via transmission to the National Patient Care Database (NPCDB), is derived from "parent" encounters that have a status of *checked out* and have been referred to the transmission process. Information contained in "child" encounters is not referred directly to the transmission process, but rather, gathered with the "parent" encounter when the "parent" encounter is transmitted.

#### Introduction

The **Outpatient Encounter Workload Section** of the report is a count of "parent" outpatient encounters by status values that are considered to be "for credit". These statuses include *checked in, checked out, no action taken, future,* and *action required.* Only statuses found in the database for the date range are reflected on the report.

Within the *checked out* category of the Outpatient Encounter Workload section, encounters are further subcategorized by transmission status. Only subcategories that are found will appear on the report. These subcategories include the following.

**No transmission record** - "Parent" encounters that are checked out but have not been referred to the transmission process (which should have happened when the record was checked out).

**Rejected for transmission** - Encounters which have failed to pass the checks for data elements required for transmission of workload to Austin.

**Not required, not transmitted** - Encounters that have been referred to the transmission process (they have a record in the TRANSMITTED OUTPATIENT ENCOUNTER file) but are not flagged to be transmitted, nor have they been transmitted.

**Awaiting transmission** - Records that have been referred to the transmission process since the last nightly transmission. They will be sent in the next nightly transmission if they pass the pre-transmission screening requirements.

**Transmitted, no acknowledgement** - Encounters that have been referred to HL7 for transmission to Austin. If there were no problems with HL7, they have been sent to Austin. The number in this category should roughly match the average number of encounters produced by a facility on any given work day. If these numbers are substantially greater than the facility's average daily workload, it may indicate a problem with HL7 has caused a failure to transmit data to Austin; or it may indicate a problem with the incoming filer that processes the acknowledgment messages returning from Austin.

#### Introduction

**Transmitted, rejected** - Encounters that have been sent to Austin but have failed the requirements for filing into NPCDB.

**Transmitted, error** - One of the possible Austin acknowledgement statuses (not currently in use).

**Transmitted, accepted** - Encounters that have been sent to Austin, processed, and an acknowledgment message indicating acceptance has been returned to the facility. This indicates the encounter has been recorded in NPCDB for national facility workload credit.

Only encounters in the Outpatient Encounter Workload section (encounters with "for credit" statuses) are used to calculate visits and uniques as reflected in the Facility Outpatient Visits and Facility Outpatient Uniques sections of this report.

The **Non-Workload Section** of the report is a count of "parent" encounters by statuses that are not given outpatient workload credit (nationally). These include *deleted*, *non-count*, *inpatient appointment*, *no-show*, and *cancelled* statuses. Only statuses that are found will appear on the report.

The **Facility Outpatient Visits Section** of the report is a count of one per patient per day (regardless of the number of encounters a patient may have had on a given day). For multi-divisional sites, the station totals are not the sum of all divisions. If a patient was seen at more than one division on a single day, they reflect as a visit to each division; however, they are still just a single visit for the facility on that date (as calculated by this report).

A patient visit will accrue to only one of the subcategories in this section. If a patient had multiple encounters on a single day and as few as one of those encounters has a "transmitted, accepted" status, the patient's visit will accrue in the 'Transmitted, accepted visits' subcategory. If none of the patient's encounters on that date have a "transmitted, accepted" status, the visit will accrue to the "Act. Req./not accepted" subcategory.

#### Introduction

The **Facility Outpatient Uniques Section** of the report is a count of one per patient for the entire date range (regardless of the number of visits a patient had). For multi-divisional sites, the station totals are not a sum of all of the divisions. If a patient was seen at more than one division during the date range, they reflect as a unique patient for each division; however, they are still counted as a single unique for the facility (as calculated by this report).

The unique patient will accrue to only one of the subcategories in this section. If the patient had multiple visits during the date range and as few as one of those visits had an encounter with a "transmitted, accepted" status, the unique will accrue to the 'Transmitted, accepted unique pts." subcategory. If none of the patient's visits had any encounters with a "transmitted, accepted" status, the unique will accrue to the "Act. Req./not accepted unique pts." subcategory.

```
*** DATE RANGE SELECTION ***

Beginning date: FIRST// 9 1 97 (SEP 01, 1997)

Ending date: LAST// 12 1 97 (DEC 01, 1997)

Break out workload by clinic group? NO// <RET>

Would you like to print a detailed list of activity for a division? NO// <RET>

List facility 'action required'/not accepted unique patients? NO// <RET>

DEVICE: HOME// A100 RIGHT MARGIN: 132// <RET>

DO YOU WANT YOUR OUTPUT QUEUED? NO// Y (YES)

Requested Start Time: NOW// <RET> (JAN 14,1998@09:22)
```

# **Example**

<*>	OUTPATIENT ENCOUNTER WORKLOAD STATISTICS <*>	
	For station: ALBANY	

For encounter dates SEP 1,1997 to DEC 1,1997 Date printed: JAN 14,1998@10:17

Page: 1

#### OUTPATIENT ENCOUNTER WORKLOAD

Status	Count	Percent
ACTION REQUIRED CHECKED OUT	19	12.03
No transmission record Not required, not transmitted	10 38	6.33 24.05
Rejected for transmission	28	17.72
Awaiting transmission	25	15.82
Transmitted, no acknowledgment	38	24.05
		=======
TOTAL:	158	100.00

# NON-WORKLOAD

		Status	Count	Percent
INPATIENT NON-COUNT	APPOINTMENT		47 4	92.16 7.84
			========	=======
		TOTAL:	51	100.00

# FACILITY OUTPATIENT VISITS

	Status	Count	Percent
Act. Req./not accepted visit Transmitted, accepted visits		100	100.00
		========	=======
	TOTAL:	100	100.00

# FACILITY OUTPATIENT UNIQUES

Status	Count	Percent
Act. Req./not accepted unique pts.	40	100.00
Transmitted, accepted unique pts.	0	0.00
	=========	=======
TOTAL:	40	100.00

# **Example**

<*>	OUTPATIENT ENCOUNTER WORKLOAD STATISTICS For division: ALBANY	<*>
For encounter dates Date printed: JAN 1	SEP 1,1997 to DEC 1,1997 4,1998@10:17	Page: 2

#### OUTPATIENT ENCOUNTER WORKLOAD

Status	Count.	Percent.
Status	Count	Percent
ACTION REQUIRED CHECKED OUT	15	14.71
No transmission record	3	2.94
Not required, not transmitted	32	31.37
Rejected for transmission	20	19.61
Awaiting transmission	2	1.96
Transmitted, no acknowledgment	30	29.41
		=======
TOTAL:	102	100.00

# NON-WORKLOAD

	Status	Count	Percent
INPATIENT APPOINTMENT		29	100.00
INPATIENT APPOINTMENT		23	=======
	TOTAL:	29	100 00

# $\hbox{\tt DIVISION} \quad \hbox{\tt OUTPATIENT} \quad \hbox{\tt VISITS}$

	Status	Count	Percent
Act. Req./not accepted visits Transmitted, accepted visits		54 0	100.00
		========	=======
	TOTAL:	54	100.00

# DIVISION OUTPATIENT UNIQUES

Status	Count	Percent
Act. Req./not accepted unique pts. Transmitted, accepted unique pts.	27 0	100.00
	========	=======
TOTAL:	27	100.00

# **Example**

	 <*>		ENCOUNTER For divisi		STATISTICS	<*>	
For encounter Date printed:		•		L997			Page: 3

#### 

Status	Count	Percent
ACTION REQUIRED CHECKED OUT	4	7.14
No transmission record	7	12.50
Not required, not transmitted	6	10.71
Rejected for transmission	8	14.29
Awaiting transmission	23	41.07
Transmitted, no acknowledgment	8	14.29
	=========	=======
TOTAL:	56	100.00

# NON-WORKLOAD

		Status	Count	Percent
INPATIENT	APPOINTMENT		18	81.82
NON-COUNT			4	18.18
		TOTAL:	22	100.00

# $\hbox{\tt DIVISION} \quad \hbox{\tt OUTPATIENT} \quad \hbox{\tt VISITS}$

 Status
 Count
 Percent

 Act. Req./not accepted visits
 47
 100.00

 Transmitted, accepted visits
 0
 0.00

 TOTAL:
 47
 100.00

# DIVISION OUTPATIENT UNIQUES

Status	Count	Percent
Act. Req./not accepted unique pts.	18	100.00
Transmitted, accepted unique pts.	0	0.00
	=========	=======
TOTAL:	18	100.00

## ACRP Reports Menu Patient Activity by Appointment Frequency

#### Introduction

This option is used for printing patient appointment activity for a selected date range for one/many/all divisions. You may choose to print by selected stop codes, a range of stop codes, or by clinic group. You may then specify the output order as alphabetic or by visit frequency.

Output from this report will include counts by clinic and stop code for each appointment that is within the parameters specified by the user. A list of future appointments is also provided for each patient identified. This report can be used by clinical staff to identify patients that are using an excessive amount of resources and assist them in consolidating and managing future care in a more cost effective manner.

### **Example**

Division prompts will only appear at multi-divisional facilities.

```
For Medical Center Division: ALL// ALBANY 500

Select another division: <RET>

*** DATE RANGE SELECTION ***

Beginning date: 1 1 97 (JAN 01, 1997)

Ending date: 12 31 97 (DEC 31, 1997)

Minimum appointment frequency: (1-999): 2

Select one of the following:

R RANGE OF STOP CODES
S SELECTED STOP CODES
C CLINIC GROUP

Limit clinics by: CLINIC GROUP

Select CLINIC GROUP NAME: BLUE TEAM
```

## **ACRP Reports Menu Patient Activity by Appointment Frequency**

## **Example**

Select one of the following:

A ALPHABETIC V VISIT FREQUENCY

Specify output order: ALPHABETIC

This report requires 132 column output.

DEVICE: HOME// A100 RIGHT MARGIN: 132// <RET>

DO YOU WANT YOUR OUTPUT QUEUED? NO// Y (YES)

Requested Start Time: NOW// <RET> (JAN 14,1998@13:22)

<\*> PATIENT ACTIVITY BY APPOINTMENT FREQUENCY <\*> IN CLINIC GROUP: BLUE TEAM

FOR PATIENTS WITH AT LEAST 2 APPOINTMENTS TO THESE CLINICS

Medical Center Division: ALBANY

\_\_\_\_\_\_

For date range: JAN 1,1997 to DEC 31,1997

Date printed: JAN 14,1998@13:38

Number of appts.: 3 Patient: DERDEN,TIM A SSN: 034-55-1017

3 appointments to CARDIOLOGY (303) 3 CARDIOLOGY appointments

Number of appts.: 5 Patient: HALBACH, MARY SSN: 234-44-5454

5 appointments to CARDIOLOGY (303)

5 CARDIOLOGY appointments

Number of appts.: 8 Patient: RUCKUS III, JOHN W. SSN: 123-45-6799

8 appointments to CARDIOLOGY (303)

8 CARDIOLOGY appointments

Number of appts.: 2 Patient: SMITH, MARK E JR SSN: 407-12-2354

2 appointments to CARDIOLOGY (303)

2 CARDIOLOGY appointments

#### ACRP Reports Menu Patient Encounter List

#### Introduction

This option is used to print a listing of patient encounters in reverse chronological order for a specified patient and date range. Data items include date/time of encounter, encounter location, encounter number, encounter type, and transmission status.

It is formatted for printer output or convenient CRT display and provides a quick way to review all encounters entered for a patient during the date range specified. This can be useful for performing data validation and verifying the current completion or transmission status of an individual encounter.

```
Select PATIENT NAME: URBAN, JOE 09-12-34 407091234 YES NSC VETERAN

*** DATE RANGE SELECTION ***

Beginning date: FIRST// 9 1 97 (SEP 01, 1997) SEP 1,1997

Ending date: LAST// t (JAN 16, 1998) JAN 16,1998

DEVICE: HOME// A100 RIGHT MARGIN: 132// <RET>
DO YOU WANT YOUR OUTPUT QUEUED? NO// Y (YES)

Requested Start Time: NOW// <RET> (JAN 16,1998@09:22)

Select PATIENT NAME: <RET>
```

# ACRP Reports Menu Patient Encounter List

====	=======	=========	=======	========	=======	===========
		< <b>*</b> >	PATIENT E	NCOUNTER LIST	<*>	
====	=======	=========	=======	:========	=======	==========
Date	e range: SE	P 1,1997 to JAN				
Pati	ient: URBAN	,JOE		SSN: 407091	234	Page: 1
====		==========	=======	=========	=======	=============
DEC	4,1997@08:			_		
	#5206	Appointment		CHECKED OUT	- Rejected	for transmission
חבים	1 1007@0Q:	 00	CAPDIOLO			
DEC		Stop Code Addi			- Child of	enc #5206
	π3207 					
OCT	24,1997@11	:00	DERMATOL	OGY		
					- Rejected	for transmission
OCT	24,1997@11	:00	DERMATOL	JOGY		
	#5083	Stop Code Addi	tion	CHECKED OUT	- Child of	enc. #5082
OCT	20,1997@10		GEN MEDI	_		
	#5074	Appointment		CHECKED OUT	- Rejected	for transmission
	 10,1997@08	:30	711010100	137		
OCI	•	Appointment	AUDIOLOG	ACTION REOUI	רשם	
	#5075	Appointment		ACIION REQUI	KED	
SEP	14,1997@12	:00	CARDIOLO	ЭGY		
222				ACTION REOUI	RED	

#### Introduction

This option is used to print information obtained from the Scheduling, Outpatient Encounter, Visit Tracking, and Patient Problem List databases. It provides a method of reviewing all data elements filed in conjunction with encounter data entry.

The report is run for a selected patient and encounter date. Two different report formats are available - short or long. The short format of the report does not include the Visit Tracking and Patient Problem List portions of the output.

This output is intended to provide comprehensive output of all encounter data filed for a patient activity date. Due to the nature of the databases involved, the data returned is lengthy and in some respects redundant. It is not designed for routine use but is a valuable tool for performing critical single-patient encounter data entry validation, and for examining database relationships when examples of problem encounters that cannot be processed normally are identified.

```
Select PATIENT NAME: URBAN, JOE 09-12-34 407091234 YES NSC VETERAN Encounter date: 12 04 97 (DEC 04, 1997)

Select one of the following:

S SHORT
L LONG

Select report format: LONG// <RET>

DEVICE: HOME// A100 RIGHT MARGIN: 132// <RET>
DO YOU WANT YOUR OUTPUT QUEUED? NO// Y (YES)

Requested Start Time: NOW// <RET> (JAN 16,1998@09:00)

Select PATIENT NAME: <RET>
```

#### **Example**

REVIEW OF SCHEDULING/PCE/PROBLEM LIST DATA

Encounter date: DEC 4,1997

Date printed: JAN 16,1998@09:01 PAGE: 1

----- \*\*\* SCHEDULING DATABASE \*\*\* -----

==> REGISTRATION/DISPOSITION DATA -- No disposition information found.

==> APPOINTMENT DATA --PATIENT file info:

APPOINTMENT DATE/TIME: DEC 04, 1997@08:00

CLINIC: CARDIOLOGY

LINIC: CARDIOLOGY PURPOSE OF VISIT: SCHEDULED VISIT
APPOINTMENT TYPE: REGULAR OUTPATIENT ENCOUNTER: DEC 04, 1997@08:00

APPOINTMENT TYPE SUB-CATEGORY: CHAMPUS

HOSPITAL LOCATION file info:

PATIENT: URBAN, JOE LENGTH OF APP'T: 15

DATA ENTRY CLERK: MORASKY, JOSEPH L. DATE APPOINTMENT MADE: DEC 11, 1997

ELIGIBILITY OF VISIT: 0 CHECKED OUT: DEC 11, 1997@10:28 CHECK OUT USER: WILLIAMS, MARY CHECK OUT ENTERED: DEC 11, 1997@10:29:24

==> SCHEDULING VISIT DATA --SCHEDULING VISIT file info:

DATE/TIME: DEC 04, 1997@08:00 PATIENT: URBAN, JOE

DIVISION: ALBANY

CLINIC STOP CODE: SPECIAL SERVICES EDITED LAST BY: WILLIAMS, MARY

ASSOCIATED CLINIC: MEDICAL ELIGIBILITY FOR VISIT: 0
APPOINTMENT TYPE: REGULAR OUTPATIENT ENCOUNTER: DEC 04, 1997@08:00

PROCEDURE 1: 20000

#### **Example**

REVIEW OF SCHEDULING/PCE/PROBLEM LIST DATA

Encounter date: DEC 4,1997

Date printed: JAN 16,1998@09:01 PAGE: 2

----- \*\*\* OUTPATIENT ENCOUNTER DATABASE \*\*\* -----

==> OUTPATIENT ENCOUNTER DATA --

OUTPATIENT ENCOUNTER file "parent" record #5206:

DATE: DEC 04, 1997@08:00 PATIENT: URBAN, JOE

CLINIC STOP CODE: GENERAL INTERNAL MEDICINE

LOCATION: CARDIOLOGY VISIT FILE ENTRY: DEC 04, 1997@08:00

CHECK OUT PROCESS COMPLETION: DEC 11, 1997@10:29

ORIGINATING PROCESS TYPE: APPOINTMENT EXTENDED REFERENCE: 1

APPOINTMENT TYPE: REGULAR MEDICAL CENTER DIVISION: ALBANY STATUS: CHECKED OUT ELIGIBILITY OF ENCOUNTER: 0
UNIQUE VISIT NUMBER: 11Q1-ALN

OUTPATIENT PROVIDER file info:

OUTPATIENT ENCOUNTER: DEC 04, 1997@08:00 PROVIDER: KILMIRE, MIKE

PROVIDER TYPE CODE: Physicians (M.D.) and Osteopaths (D.O.)

OUTPATIENT DIAGNOSIS file info:

OUTPATIENT ENCOUNTER: DEC 04, 1997@08:00 DIAGNOSIS: 911.0

DIAGNOSIS RANKING: 1

TRANSMITTED OUTPATIENT ENCOUNTER info:

NUMBER: 549 JMBER: 549OUTPATIENT ENCOUNTER: DEC 04, 1997@08:00TRANSMISSION REQUIRED: YESTRANSMISSION EVENT: EDIT

DATE/TIME OF EVENT: DEC 11, 1997@10:37:08

USER CAUSING EVENT: WILLIAMS, MARY

TRANSMITTED OUTPATIENT ENCOUNTER ERROR info:

Error Code: 7000 Encounter Eligibility code missing or invalid

Error Code: 7000 Eligibility Code Inactive
Error Code: 8100 Invalid means test indicator
Error Code: B100 Missing or invalid Period of Service
Error Code: B120 Period of Service is inactive.

OUTPATIENT ENCOUNTER file "child" record #5207:

#### **Example**

REVIEW OF SCHEDULING/PCE/PROBLEM LIST DATA

Encounter date: DEC 4,1997
Date printed: The second of the

Date printed: JAN 16,1998@09:01 PAGE: 3

\_\_\_\_\_\_

DATE: DEC 04, 1997@08:00 PATIENT: URBAN, JOE

CLINIC STOP CODE: GENERAL INTERNAL MEDICINE

LOCATION: CARDIOLOGY VISIT FILE ENTRY: DEC 04, 1997@08:00

PARENT ENCOUNTER: DEC 04, 1997@08:00

CHECK OUT PROCESS COMPLETION: DEC 11, 1997@10:29 ORIGINATING PROCESS TYPE: STOP CODE ADDITION

EXTENDED REFERENCE: 1 APPOINTMENT TYPE: REGULAR MEDICAL CENTER DIVISION: ALBANY STATUS: CHECKED OUT ELIGIBILITY OF ENCOUNTER: 0 UNIQUE VISIT NUMBER: 11Q1-ALN

----- \*\*\* VISIT TRACKING DATABASE \*\*\* -----

==> VISIT DATA --

VISIT file "parent" record #859:

VISIT/ADMIT DATE&TIME: DEC 04, 1997@08:00 DATE VISIT CREATED: DEC 11, 1997@10:28:44

TYPE: VA
LOC. OF ENCOUNTER: ALBANY
DSS ID: GENERAL INTERNAL MEDICINE
PATIENT NAME: URBAN, JOE
SERVICE CATEGORY: AMBULATORY
DEPENDENT ENTRY COUNT: 5

DATE LAST MODIFIED: DEC 11, 1997@10:34:13

HOSPITAL LOCATION: CARDIOLOGY

OPTION USED TO CREATE: SDM

PATIENT STATUS IN/OUT: OUT

CREATED BY USER: WILLIAMS, MARY

VISIT ID: 11Q1-ALN

ENCOUNTER TYPE: PRIMARY

PACKAGE: SCHEDULING

V PROVIDER file info:

ROVIDER: KILMIRE,MIKE PATIENT NAME: URBAN,JOE VISIT: DEC 04, 1997@08:00 PRIMARY/SECONDARY: PRIMARY PROVIDER: KILMIRE, MIKE

PERSON CLASS: Physicians (M.D.) and Osteopaths (D.O.) PACKAGE: SCHEDULING AUDIT TRAIL: 13-A 1312;

DATA SOURCE: PIMS

#### **Example**

REVIEW OF SCHEDULING/PCE/PROBLEM LIST DATA

Encounter date: DEC 4,1997

Date printed: JAN 16,1998@09:01 PAGE: 4

V POV file info:

POV: 911.0 PATIENT NAME: URBAN, JOE

VISIT: DEC 04, 1997@08:00

PROVIDER NARRATIVE: ABRASION OF TRUNK, WITHOUT MENTION OF INFECTION

PRIMARY/SECONDARY: PRIMARY

PACKAGE: SCHEDULING

AUDIT TRAIL: 13-A 1312;

DATA SOURCE: PIMS

V CPT file info:

CPT: 20000

PT: 20000 PATIENT NAME: URBAN, JOE
VISIT: DEC 04, 1997@08:00 PROVIDER NARRATIVE: INCISION OF ABSCESS
QUANTITY: 1 AUDIT TRAIL: 13-A 1312;
PACKAGE: SCHEDULING DATA SOURCE: PIMS

----- \*\*\* PATIENT PROBLEM LIST \*\*\* -----

No Problem List information found.

## ACRP Reports Menu Trend of Facility Uniques by 12 Month Date Ranges

#### Introduction

This option is used for trending facility outpatient uniques by overlapping 12 month date ranges for the past 5 years. You may run the report for one/many/all divisions. Output includes a count of uniques for each 12 month date range and displays a histogram that represents the volume of these uniques.

During the summer of 1998, a conversion will be performed that will change the Scheduling package databases. Among other things, it will remove the legacy files and programs related to the OPC generation and transmission process that preceded the current ACRP transmission methodology.

Until that conversion occurs, this report will derive data from the OPC file for activity dates prior to 10/1/96, and is based on records in the OUTPATIENT ENCOUNTER file with *checked-out* status for activity dates after 9/30/96. Data in the OPC file may not be available if the site has utilized the Scheduling package purge functionality.

Following the conversion, this report will derive its counts of uniques for the entire five year date range from OUTPATIENT ENCOUNTER records that have a *checked-out* status.

### **Example**

Division prompts will only appear at multi-divisional facilities.

```
For Medical Center division: ALL// Albany 500

Select another division: <RET>

This report requires 132 column output.

DEVICE: HOME// A100 RIGHT MARGIN: 132// <RET>
DO YOU WANT YOUR OUTPUT QUEUED? NO// Y (YES)

Requested Start Time: NOW// <RET> (JAN 16,1998@09:22)
```

# **ACRP Reports Menu Trend of Facility Uniques by 12 Month Date Ranges**

# **Example**

12 mo. dat	ce range Unic	ques	Histogram (each "*" equals 10 uniques)
01/93 thr	ru 12/93	30 l	***
•	ru 01/94	42	***
03/93 thr	ru 02/94	45	***
04/93 thr	ru 03/94	52	****
05/93 thr	ru 04/94	60	****
06/93 thr	ru 05/94	69	****
07/93 thr	ru 06/94	89	*****
08/93 thr	ru 07/94	90	*****
09/93 thr	ru 08/94	99	*****
10/93 thr	ru 09/94	107	*****
11/93 thr	ru 10/94	105	*****
12/93 thr	ru 11/94	102	*****
01/94 thr	ru 12/94	102	*****
02/94 thr	ru 01/95	7 +	*****
03/94 thr	ru 02/95	91	*****
04/94 thr		84	*****
05/94 thr	ru 04/95	82	*****
06/94 thr	ru 05/95	78	*****
07/94 thr		61	****
08/94 thr	ru 07/95	60	****
09/94 thr	ru 08/95	59	****
10/94 thr	ru 09/95	53	****
11/94 thr	ru 10/95	56	****
12/94 thr	ru 11/95	50	****
01/95 thr	ru 12/95	50	****
02/95 thr	ru 01/96	24	****
03/95 thr	ru 02/96	54	****
04/95 thr	ru 03/96	54	****
05/95 thr	ru 04/96	50	****

# **ACRP Reports Menu Trend of Facility Uniques by 12 Month Date Ranges**

# **Example**

<*>	TREND OF FACILITY UNIQUES BY 12 MONTH DATE RANGES FOR MEDICAL CENTER DIVISION: ALBANY	<*>	
Date printed:	JAN 16,1998@10:01		Page: 2

12 mo.	date	range	Uniques	Histogram (each "*" equals 10 uniques)
06/95	thru	05/96	47	***
07/95	thru	06/96	44	****
08/95	thru	07/96	43	****
09/95	thru	08/96	41	****
10/95	thru	09/96	41	****
11/95	thru	10/96	38	***
12/95	thru	11/96	37	***
01/96	thru	12/96	38	***
02/96	thru	01/97	35	***
03/96	thru	02/97	33	***
04/96	thru	03/97	33	***
05/96	thru	04/97	32	***
06/96	thru	05/97	33	***
07/96	thru	06/97	37	***
08/96	thru	07/97	42	****
09/96	thru	08/97	47	****
10/96	thru	09/97	53	****
11/96	thru	10/97	50	****
12/96	thru	11/97	53	****

Counts of uniques prior to 10/01/96 are based on OPC file records, counts of uniques after 10/01/96 are based on OUTPATIENT ENCOUNTER file records with a status of 'checked out'. This excludes any 'action required' activity.

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